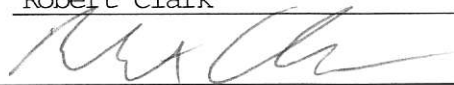


Original

**PART 4
PROPOSALS DOCUMENTS
PROPOSALS COVER PAGE**

Name of Firm, Entity or Organization: Marion/Service Roofing & Sheet Metal Co.	
Federal Employer Identification Number (FEIN): 59-2462556	
State of Florida License Number (If Applicable): CCC054796	
Name of Contact Person: Robert Clark	
Title: Vice President	
E-Mail Address: rclark@serviceroofing.com	
Mailing Address: PO Box 1628 Ocala FL 34478-1628	
Street Address (if different): 1011 SW 33rd Ave Ste 200	
City, State, Zip: Ocala FL 34474	
Telephone: (352) 622-7256	Fax: (352) 622-1466
Organizational Structure – Please Check One:	
Corporation <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other <input type="checkbox"/>	
If Corporation:	
Date of Incorporation: 10/31/1984	State of Incorporation: FL
States Registered in as Foreign Corporation: N/A	
Authorized Signature:	
Print Name: Robert Clark	
Signature: 	
Title: Vice President	
Phone: (352) 622-7256	
<i>This document must be completed and returned with your Submittal.</i>	

**PROPOSALS FORM FOR
BOARD OF SUMTER COUNTY COMMISSIONERS
EXHIBIT A**



Name of Firm Submitting Qualifications Marion/Service Roofing & Sheet Metal Co.

Name of Person Submitting Qualifications Robert Clark

PROPOSER ACKNOWLEDGMENT

"The undersigned hereby declares that he/she has informed himself/herself fully in regard to all conditions to the work to be done, and that he/she has examined the RFP and Specifications for the work and comments hereto attached. The Vendor proposes and agrees, if this submission is accepted, to contract with the Board of Sumter County Commissioners, to furnish all necessary materials, equipment, labor and services necessary to complete the work covered by the RFP and Contract Documents for this Project. The Vendor agrees to accept in full compensation for each item the prices named in the schedules incorporated herein."

CONSULTANT'S FEE SCHEDULE MUST BE ATTACHED TO THIS PROPOSAL


Signature Robert Clark

10/12/11
Date

[☐] Check if exception(s) or deviation(s) to Specifications. Attach separate sheet(s) detailing reason and type for the exception or deviation.

This document must be completed and returned with your Submittal

PROPOSAL DOCUMENTS CHECKLIST OF ITEMS REQUIRED TO BE SUBMITTED

The following documents and forms in the following arrangement must accompany each proposal or alternate proposal submitted:

- ☐ Proposal Cover Page. This is to be used as the first page of the RFP. This form must be fully completed and signed by an authorized officer of the vendor.
- ☐ Proposal Form Exhibit A.
- ☐ Proposal Document Checklist of Items Required to be Submitted.
- ☐ A separate sheet or sheets, clearly identified and numbered, of Exceptions or Deviations from the minimum specifications, must be attached to the Proposal Form (if applicable).
- ☐ Proposer Certification / Addenda Acknowledgement Form.
- ☐ Statement of General Terms and Conditions.
- ☐ Disclosure of Subcontractors, Sub-consultants and Suppliers
- ☐ Proposal / Price Form
- ☐ A sworn, notarized Statement of Contractor's Experience and Personnel.
- ☐ A sworn, notarized Drug Free Work Place Certificate must accompany each proposal or alternate proposal.
- ☐ One original proposal, clearly labeled "Original; three printed copies of the proposal in its entirety; and one electronic version not password protected of the original submitted proposal in its entirety.
- ☐ A Certificate of Insurability, acceptable to the County, shall accompany each proposal or alternate proposal, in the amounts as prescribed by State and Sumter County BOCC
 - ☐ Liability Insurance: The submitter shall purchase and maintain such insurance as will protect him/her from claims which may arise out of or result from the vendor's operations under the terms and conditions of the Proposal. Liability insurance shall be obtained at the vendor's expense and in his/her name as the insured, which Certificate shall show Sumter County Board of County Commissioners as additional name insured. Liability insurance shall be provided on a form approved by Sumter County Board of County Commissioners and shall include endorsements for contractual liability and such other endorsements appropriate for the work required by this Proposal as may be required by the Sumter County BOCC. The limit of liability for this coverage shall not be less than \$1,000,000 single event limit.

- Automobile Liability Insurance covering all automobiles and trucks the vendor may use in connection with this Proposal. The limit of liability for this coverage shall not be less than \$500,000 CSL per occurrence for bodily injury and property damage. This is to include owned, hired, and non-owned vehicles.
- Workers' Compensation Insurance, as required by the State of Florida.

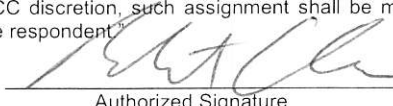
All insurance policies shall be written on companies authorized to do business in the State of Florida and satisfactory to the Sumter County BOCC. Prior to commencing services pursuant to the award of this proposal, the Contractor shall furnish to the Sumter County BOCC certificates of insurance showing the required coverage has been procured and paid for in advance. Within thirty (30) days prior to expiration, the Contractor shall provide the Sumter County BOCC with proof that required coverage has been extended.

Date: 10/12/2011

I, Robert Clark (name), an authorized officer of Marion/Service Roofing & Sheet Metal Co. (company/vendor), confirm that the above listed documents are provided in our company's proposal being submitted to Sumter County and confirm I have read and understand the RFP document in its entirety.

This document must be completed and returned with your Submittal.

PROPOSER'S CERTIFICATION

Submit To: Sumter County Board of County Commissioners 7375 Powell Road Wildwood, Florida, 34785 Phone 352-689-4400 Fax 352-689-4401		SUMTER COUNTY BOARD OF COUNTY COMMISSIONERS REQUEST FOR PROPOSALS (RFP) CERTIFICATION AND ADDENDA ACKNOWLEDGMENT	
DUE DATE: October 12, 2011	DUE TIME: 10:00 am	RFP # 026-0-2011/AT	
TITLE: Sumter County On-Call Roofing Repairs & New Installation			
VENDOR NAME:		PHONE NUMBER:	
Marion/Service Roofing & Sheet Metal Co		(352) 622-7256	
VENDOR MAILING ADDRESS:		FAX NUMBER:	
PO Box 1628		(352) 622-1466	
CITY/STATE/ZIP:		E-MAIL ADDRESS:	
Ocala FL 34478-1628		ocala@servicerroofing.com	
<p>"I, the undersigned, certify that I have reviewed the addenda listed below (list all addenda received to date). I understand that timely commencement will be considered in award of this RFP and that cancellation of award will be considered if commencement time is not met, and that untimely commencement may be cause for termination of contract. I further certify that the services will meet or exceed the RFP requirements. I, the undersigned, declare that I have carefully examined the RFP, specifications, terms and conditions as applicable for this Request, and that I am thoroughly familiar with all provisions and the quality and type of coverage and services specified. I further declare that I have not divulged, discussed, or compared this RFP with any other Offeror and have not colluded with any Offerors or parties to an RFP whatsoever for any fraudulent purpose."</p>			
<u>N/A</u> Addendum #	<u>N/A</u> Addendum #	<u>N/A</u> Addendum #	<u>N/A</u> Addendum #
<p>"I certify that this quote is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting an RFP for the same material, supplies, equipment or services and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this RFP and certify that I am authorized to sign this response and that the offer is in compliance with all requirements of the RFP, including but not limited to certification requirements. In conducting offers with an agency for Sumter County Board of County Commissioners (BOCC), respondent agrees that if this Proposals is accepted, the respondent will convey, sell, assign, or transfer to the Sumter County BOCC all rights, title and interest in and to all causes of action it may now or hereafter acquire under the anti-trust laws of the United States for price fixing relating to the particular commodities or services purchased or acquired by the COUNTY. At the Sumter County BOCC discretion, such assignment shall be made and become effective at the time the purchasing agency renders final payment to the respondent."</p>			
<u>Robert Clark, Vice President</u> Authorized Agent Name, Title (Print)		 Authorized Signature	<u>10/12/11</u> Date
<i>This form must be completed and returned with your Submittal</i>			

Statement of General Terms and Conditions

PUBLIC ENTITY CRIME: A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a Proposal/Bid on a contract to provide any goods or services to a public entity, for the construction or repair of a public building or public work, may not submit Proposals/Bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.

INDEMNIFICATION: The Contractor agrees to indemnify and hold harmless Board of Sumter County Commissioners, and their elected officials, employees and volunteers from and against all claims, losses and expenses, including legal costs, arising out of or resulting from, the performance of this contract, provided that any such claims, damage, loss of expenses is attributed to bodily injury, sickness, disease, personal injury or death, or to injury to or destruction of tangible property including the loss or loss of use resulting there from and is caused in whole or in part by any negligent act or omission of the tenant.

PROHIBITION OF LOBBYING: During the black out period which is, the period between the time the submittals for invitation to bid or the Request for Proposals, or Qualifications, or information, as applicable, are received at Contracts / Purchasing and the time the Board awards the contract, no proposer, no lobbyist, principal, or other person may lobby, on behalf of a competing party in a particular procurement matter, any member of the Board, or any Board employee other than the Financial Services Manager. Violation of this provision may result in disqualification of violating party. All questions regarding this Request for Proposals (RFP) or Invitation to Bid (BID) must be submitted in writing to the Board's Financial Services Manager.

ANTI TRUST LAWS: By submission of a signed RFP or BID, the successful Vendor acknowledges compliance with all antitrust laws of the United States and the State of Florida, in order to protect the public from restraint of trade, which illegally increases prices.

CONFLICT OF INTEREST: The award of the contract hereunder is subject to the provisions of Chapter 112 of the Florida Statutes. Vendors shall disclose the name of any Officer, Director, Partner, Associate, or Agent who is also an Officer, Appointee, or Employee of any of the Boards at the time of the RFP or BID, or at the time of occurrence of the Conflict of Interest thereafter.

INTERPRETATION, CLARIFICATIONS AND ADDENDA: No oral interpretations will be made to any vendor as to the meaning of the RFP/BID Contract Documents. Any inquiry or request for interpretation received by the Financial Services Manager before the date listed herein will be given consideration. All such changes or interpretations will be made in writing in the form of an addendum and, if issued, will be distributed at or after the Pre-Proposals/Pre-Bid Conference, mailed or sent by available or electronic means to all attending prospective Submitters prior to the established RFP/BID opening date. Each Vendor shall acknowledge receipt of such addenda in the space provided. In case any Proposer/Bidder fails to acknowledge receipt of such addenda or addendum, his offer will nevertheless be construed as though it had been received and acknowledged and the submission of his bid will constitute acknowledgment of the receipt of same. All addenda are a part of the RFP/BID FORMS and each Proposer/Bidder will be bound by such addenda, whether or not received by him. It is the responsibility of each proposer/bidder to verify that he has received all addenda issued before RFP's/BID's are opened. In the case of unit price items, the quantities of work to be done and materials to be furnished under this RFP/BID Contract are to be considered as approximate only and are to be used solely for the comparison of RFP's/BID's received. The Board and/or its CONSULTANT do not expressly or by implication represent that the actual quantities involved will correspond exactly therewith; nor shall the Vendor plead misunderstanding or deception because of such estimate or quantities of work performed or material furnished in accordance with the Specifications and/or Drawings and other Proposals/Bid Documents, and it is understood that the quantities may be increased or diminished as provided herein without in any way invalidating any of the unit or lump sum prices bid.

GOVERNING LAWS AND REGULATIONS: The vendor is required to be familiar with and shall be responsible for complying with all federal, state and local laws, ordinances, rules and regulations that in any manner affect the work.

PROPRIETARY/CONFIDENTIAL INFORMATION: Vendors are hereby notified that all information submitted as part of, or in support of RFP's/BID's, will be available for public inspection ten days after opening of the RFP's/BID's or until a short list is recommended whichever comes first, in compliance with Chapter 119, and 287 of the Florida Statutes. Any person wishing to view the RFP's/BID's must make an appointment by calling the Financial Services Manager at (352) 793-0200. All RFP's/BID's submitted in response to this solicitation become the property of the Board. Unless information submitted is proprietary, copy written, trademarked, or patented, the Board reserves the right to utilize any or all information, ideas, conceptions, or portions of any RFP/BID, in its best interest.

TAXES: The Board of Sumter County Commissioners is exempt from any taxes imposed by the State and/or Federal Government. Exemption certificates will be provided upon request.

NON-COLLUSION DECLARATION: By signing this RFP/BID, all Vendors shall affirm that they shall not collude, conspire, connive or agree, directly or indirectly, with any other Proposer, firm, or person to submit a collusive or sham Proposals in connection with the work for which their RFP/BID has been submitted; or to refrain from Bidding in connection with such work; or have in any manner, directly or indirectly, sought by person to fix the price or prices in the RFP/BID or of any other Bidder, or to fix any overhead, profit, or cost elements of the RFP/BID price or the RFP/BID price of any other Bidder, or to secure through any collusion, conspiracy, connivance, or unlawful agreement any advantage against any other Bidder, or any person interested in the proposed work.

PROPOSER RESPONSIBILITY: Invitation by the Boards to vendors is based on the recipient's specific request and application to DemandStar by Onvia at www.DemandStar.com [(800) 711-1712] or as the result of response by the public to the legal advertisements required by State law. Firms or individuals submit their responses on a voluntary basis, and therefore are not entitled to compensation of any kind.

OWNERSHIP OF SUBMITTALS: All responses, inquiries or correspondence relating to or in reference to this RFP/BID, and all other reports, charts, displays, schedules, exhibits and other documentation submitted by the vendors will become the property of the Board. Reference to literature submitted with a previous RFP/BID will not relieve the Bidder from including any required documents with this RFP/BID.

EXAMINATION OF BID DOCUMENTS: Each Bidder shall carefully examine the RFP/BID Document to ensure all pages have been received, all drawings and/or Specifications and other applicable documents are included, and shall inform himself thoroughly regarding any and all conditions and requirements that may in any manner affect cost, progress or performance of the work to be performed under the Contract. Ignorance on the part of the CONTRACTOR will in no way relieve him of the obligations and responsibilities assumed under the Contract.

VENDOR RESPONSIBILITY: Vendors are fully and completely responsible for the labeling, identification and delivery of their submittals. The Financial Services Manager will not be responsible for any mislabeled or misdirected submissions, nor those handled by delivery persons, couriers, or the US Postal Service.

DRUG FREE WORKPLACE: All Proposers/Bidders shall submit the enclosed, duly signed and notarized form entitled "Drug Free Workplace Certificate". The Drug Free Workplace Vendor shall have the burden of demonstrating that his program complies with Section 287.087 of the Florida Statutes, and any other applicable state law.

This document must be completed and returned with your Submittal.

BOARD OF SUMTER COUNTY COMMISSIONERS, are political subdivisions of the State of Florida, and reserve the right to reject any and/or all submittals, reserve the right to waive any informalities or irregularities in the examination process, and reserve the right to award contracts and/or in the best interest of the Boards. Submittals not meeting stated minimum terms and qualifications may be rejected by the Boards as non-responsive. The Boards reserve the right to reject any or all submittals without cause. The Boards reserves the right to reject the submission of any Vendor in arrears or in default upon any debt or contract to the Boards, or who has failed to perform faithfully any previous contract with the Boards or with other governmental agencies.

PUBLIC RECORDS LAW: Correspondence, materials and documents received pursuant to this RFP/BID become public records subject to the provisions of Chapter 119, Florida Statutes.

VERIFICATION OF TIME: Nextel time is hereby established as the Official Time of the Boards.

PREPARATION OF PROPOSALS/BIDS:

Signature of the Bidder: The Bidder must sign the RFP/BID FORMS in the space provided for the signature. If the Proposer/Bidder is an individual, the words, "doing business as _____" must appear beneath such signature. In the case of a partnership, the signature of at least one of the partners must follow the firm name and the words, "Member of the Firm" should be written beneath such signature. If the Proposer/Bidder is a corporation, the title of the officer signing the RFP/BID on behalf of the corporation must be stated and evidence of his authority to sign the RFP/BID must be submitted. The Proposer/Bidder shall state in the RFP/BID FORMS the name and address of each person interested therein.

Basis for Bidding: The price proposed for each item shall be on a lump sum or unit price basis according to specifications on the RFP/BID FORM. The proposed prices shall remain unchanged for the duration of the Contract and no claims for cost escalation during the progress of the work will be considered, unless otherwise provided herein.

Total Proposed Price/Total Contract Sum Proposed: If applicable, the total price bid for the work shall be the aggregate of the lump sum prices proposed and/or unit prices multiplied by the appropriate estimated quantities for the individual items and shall be stated in figures in the appropriate place on the RFP/BID FORM. In the event that there is a discrepancy on the RFP/BID FORM due to unit price extensions or additions, the corrected extensions and additions shall be used to determine the project bid amount.

TABULATION: Those wishing to receive an official tabulation of the results of the opening of this RFP/BID are to submit a self-addressed, stamped business size (No. 10) envelope, prominently marked on the front lower left side, with the RFP identification. Tabulation requested by telephone, fax or electronic media will not be accepted.

OBLIGATION OF WINNING BIDDER: The contents of the RFP/BID of the successful proposer/bidder will become contractual obligations if acquisition action ensues. Failure of the successful Proposer/Bidder to accept these obligations in a contract may result in cancellation of the award and such vendor may be removed from future participation.

AWARD OF BID: It is the Boards' intent to select a vendor within sixty (60) calendar days of the deadline for receipt of Proposals/Bids. However, Proposals/Bids must be firm and valid for award for at least ninety (90) calendar days after the deadline for receipt of the RFP/BID.

ADDITIONAL REQUIREMENTS: The firms shall furnish such additional information as the Boards may reasonably require. This includes information which indicates financial resources as well as ability to provide the services. The Boards reserve the right to make investigations of the qualifications of the firm as it deems appropriate.

PREPARATION COSTS: The Boards shall not be obligated or be liable for any costs incurred by Proposers/Bidders prior to issuance of a contract. All costs to prepare and submit a response to this RFP/BID shall be borne by the Proposer/Bidder.

TIMELINESS: All work will commence upon authorization from the Boards' representative (Financial Services Manager). All work will proceed in a timely manner without delays. The Contractor shall commence the work UPON RECEIPT OF NOTICE TO PROCEED and/or ORDER PLACED (PURCHASE ORDER PRESENTED), and shall deliver in accordance to the terms and conditions outlined and agreed upon herein.

DELIVERY: All prices shall be FOB Destination, Sumter County, Florida, inside delivery unless otherwise specified.

ADDITIONAL SERVICES/PURCHASES BY OTHER PUBLIC AGENCIES ("PIGGY-BACK"):

The Vendor by submitting a Bid acknowledges that other Public Agencies may seek to "Piggy-Back" under the same terms and conditions, during the effective period of any resulting contract – services and/or purchases being offered in this Bid, for the same prices and/or terms proposed. Vendor has the option to agree or disagree to allow contract Piggy-Backs on a case-by-case basis. Before a Public Agency is allowed to Piggy-Back any contract, the Agency must first obtain the vendor's approval – without the vendor's approval, the seeking Agency cannot Piggy-Back.

PLANS, FORMS & SPECIFICATIONS: Bid Packages are available from the Financial Services Manager. These packages are available for pickup or by mail. If requested to mail, the Proposer/Bidder must supply a courier account number (UPS, FedEx, etc). Proposers/Bidders are required to use the official RFP/BID FORMS, and all attachments itemized herein, are to be submitted as a single document. Any variation from the minimum specifications must be clearly stated on the RFP/BID FORM and/or Exceptions/Deviations Sheet(s). Only one set of plans, forms, and specifications will be furnished each company or corporation interested in submitting a Proposals/bid. RFP/BID FORM documents for this project are free of charge and are available on-line and are downloadable (vendor must pay any DemandStar fees or any shipping).

MANUFACTURER'S NAME AND APPROVED EQUIVALENTS: Any manufacturer's names, trade names, brand names, information and/or catalog numbers listed in a specification are for information and not intended to limit competition unless otherwise indicated. The Proposer/Bidder may offer any brand for which he is an authorized representative, which meets or exceeds the RFP/BID specification for any item(s). If RFP's/BID's are based on equivalent products, indicate on the RFP/BID FORM the manufacturer's product name and literature, and/or complete specifications. Reference to literature submitted with a previous RFP/BID will not satisfy this provision. The Proposer/Bidder shall explain in detail the reason(s) why the proposed equivalent will meet the specifications and not be considered an exception thereto. RFP's/BID's which do not comply with these requirements are subject to rejection. RFP's/BID's lacking any written indication of intent to quote an alternate brand will be received and considered in complete compliance with the specifications as listed on the RFP/BID FORM. The Financial Services Manager is to be notified, in writing, of any proposed changes in materials used, manufacturing process, or construction. However, changes shall not be binding upon the Boards unless evidenced by a Change Notice issued and signed by the Financial Services Manager, or designated representative.

QUANTITIES: The quantities as specified in this RFP/BID are estimates only and are not to be construed as guaranteed minimums.

SAMPLES: Samples of items, when called for, shall be furnished free of expense, and if not destroyed may, upon request, be returned at the Proposer's/Bidder's expense. Each sample shall be labeled with the Proposer's/Bidder's name, manufacturer brand name and number, RFP/BID number and item reference. Samples of successful Proposer's/Bidder's items may remain on file for the term of the contract. Request for return of samples shall be accompanied by instructions which include shipping authorization and must be received at time of opening. Samples not returned may be disposed of by the Boards within a reasonable time as deemed appropriate.

DOCUMENT RE-CREATION: Vendor may choose to re-create any document(s) required for this solicitation, but must do so at his own risk. All required information in the original Board format must be included in any re-created document. Submittals may be deemed non-responsive if required information is not included in any re-created document.

ACKNOWLEDGED:

Robert Clark (Signature and Date)

10/12/11

DISCLOSURE OF SUBCONTRACTORS, SUBCONSULTANTS AND SUPPLIERS

SUBCONTRACTOR LICENSE INFORMATION MUST BE SUBMITTED WITH THE RFP, IN ORDER FOR SUMTER COUNTY TO VERIFY THAT THE SUBCONTRACTOR ARE IN FACT LICENSE PERFORM THEIR TRADE SCOPE OF WORK.

Name of Firm Submitting Proposal:

Marion/Service Roofing & Sheet Metal Co.
(Print or Type)

Name of Person Submitting Proposal:

Robert Clark
(Print or Type)

Please list all Subcontractors, or Material \ Equipment Suppliers to be used in connection with performance of this contract. Attach additional sheets as necessary.

N/A

Name of Firm or Agency:

Address:

Telephone:

Contractor's License number

Contact Name / Title:

Name of Firm or Agency:

Address:

Telephone:

Contractor's License number

Contact Name / Title:

Name of Firm or Agency:

Address:

Telephone:

Contractor's License number

Contact Name / Title:

Name of Firm or Agency:

Address:

Telephone:

Contractor's License number

Contact Name / Title:

This document must be completed and returned with your Submittal

PROPOSAL / PRICING FORM

Date Submitted: October 12, 2011

Company Name: Marion/Service Roofing & Sheet Metal Co.

Business Address: 1011 SW 33rd Ave Ste 200 Ocala FL 34474

Telephone Number: (352) 622-7256

Person who may be contacted for information regarding the contents of this proposal:

Robert Clark

References:

	Marion County Schools	
(1)	John Sergeant	(352) 671-6956
	<i>Company Name Contact Name</i>	<i>Telephone No.</i>
	City of Ocala	
(2)	Bruce Wiley	(352) 351-6786
	<i>Company Name Contact Name</i>	<i>Telephone No.</i>
	University of Florida	
(3)	Jim Thompson	(352) 494-7252
	<i>Company Name Contact Name</i>	<i>Telephone No.</i>

QUOTE RESPONSE CONTINUED

Description	Unit Price
1. Material (cost plus %) <u>15%</u>	
2. Rental Equipment (cost plus %) <u>0%</u>	
3. Journeyman (straight time) <u>\$65.00</u>	per hour
4. Apprentice (straight time) <u>\$60.00</u>	per hour
5. Helper (straight time) <u>\$50.00</u>	per hour
6. General Laborer (straight time) <u>\$45.00</u>	per hour

Misc. Charges

Charges for Estimates \$0.00

Maximum Charges for Service Vehicles Included

Business / Occupational License Attached Yes X No

License numbers of all personnel available for this contract attached? Yes X No

REFERENCE & SIMILAR PROJECTS EXPERIENCE FORM

Owner / Business Name: City of Ocala		
Project Location / Address: Various		
City: Ocala	State: FL	Zip Code:
Point of Contact: Bruce Wiley	Dates of Work: Various	
Phone Number: (352) 789-4323	Fax Number: (352) 867-5131	
E-mail Address:		
Project Name: Annual contract		
Brief Description of Project: Leak repairs throughout the City of Ocala.		

Owner / Business Name: The Pantry, Inc		
Project Location / Address: Various		
City: Various	State: FL	Zip Code:
Point of Contact: April Stephens	Dates of Work: Various	
Phone Number: (800) 476-7574 ext 5127	Fax Number: (919) 776-1813	
E-mail Address:		
Project Name: N/A		
Brief Description of Project: Leak repairs throughout the State of Florida		

Owner / Business Name: Leesburg Regional Medical Center		
Project Location / Address: 600 E Dixie Ave		
City: Leesburg	State: FL	Zip Code: 34748
Point of Contact: Wade Rabon	Dates of Work: Various	
Phone Number: (352) 323-5322	Fax Number: (352) 323-5397	
E-mail Address:		
Project Name: N/A		
Brief Description of Project: Leak repairs at various locations		

CONTRACTOR'S AFFIDAVIT

State of Florida

County of Marion

Before me personally appeared Robert Clark who is (title) Vice President
of (the company described herein) Marion/Service Roofing being duly sworn, deposes and says that the foregoing
statements are a true and accurate statement of the position of said organization as of the date thereof, and, that the statements
and answers to the foregoing experience questionnaire are correct and true as of the date of this affidavit; and, that he/she
understands that intentional inclusion of false, deceptive, or fraudulent statements of this application constitutes fraud; and, agrees
to furnish any pertinent information requested by The Sumter County Board of County Commissioner deemed necessary to verify
the statements made in this application or regarding the ability, standing and general reputation of the applicant.

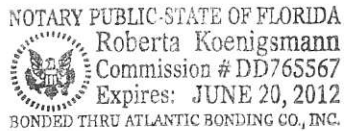
Personally Known X or Produced Identification _____

Sworn to and subscribed before me this 12th day of October, 2011

Roberta Koenigsmann
NOTARY PUBLIC - STATE OF FLORIDA
(Signature of Notary Public)

Roberta Koenigsmann
(Print Name of Notary Public)

(seal)



This document must be completed and returned with your Submittal

DRUG FREE WORKPLACE CERTIFICATE

I, the undersigned, in accordance with Florida Statute 287.087, hereby certify that,

Marion/Service Roofing & Sheet Metal Co.
(print or type name of firm)

- ☐ Publishes a written statement notifying that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace named above, and specifying actions that will be taken against violations of such prohibition.
- ☐ Informs employees about the dangers of drug abuse in the work place, the firm's policy of maintaining a drug free working environment, and available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug use violations.
- ☐ Gives each employee engaged in providing commodities or contractual services that are under Proposals or bid, a copy of the statement specified above.
- ☐ Notifies the employees that as a condition of working on the commodities or contractual services that are under Proposals or bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, plea or guilty or nolo contendere to, any violation of Chapter 1893, or of any controlled substance law of the State of Florida or the United States, for a violation occurring in the work place, no later than five (5) days after such conviction, and requires employees to sign copies of such written (*) statement to acknowledge their receipt.
- ☐ Imposes a sanction on, or requires the satisfactory participation in, a drug abuse assistance or rehabilitation program, if such is available in the employee's community, by any employee who is so convicted.
- ☐ Makes a good faith effort to continue to maintain a drug free work place through the implementation of the drug free workplace program.
- ☐ "As a person authorized to sign this statement, I certify that the above named business, firm or corporation complies fully with the requirements set forth herein".

Robert Clark
Authorized Signature

10/12/11

Date Signed

State of: Florida

County of: Marion

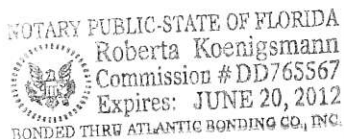
Sworn to and subscribed before me this 12th day of October, 2011

Personally known X or Produced Identification _____
(Specify Type of Identification)

Roberta Koenigsmann
Signature of Notary

My Commission Expires 6/20/12

(seal)



This document must be completed and returned with your Submittal

The service to be furnished by us is hereby declared and guaranteed to be in conformance with the specifications of the County.

The undersigned do agree that should this Proposal be accepted, to execute the form of contract and present the same to the Director for approval within fifteen (15) days after being notified of the awarding of the Contract.

IN WITNESS WHEREOF, WE have hereunto subscribed our names on this 12th day of Oct. of 2011 in the County of Marion, in the State of FL

Marion/Service Roofing & Sheet Metal Co.
Firm's Complete Legal Name

PO Box 1628 (Address)
Ocala FL 34478-1628 (City, State, ZIP)

Phone No (352) 622-7256 Fax No (352) 622-1466

Circle one of the following:

Sole Proprietorship

Corporation or P.A. State of FL

Limited Partnership

General Partnership By: _____

Typed and Written Signature Robert Clark (Typed)  (Written)

Title Vice President

ADDITIONAL CONTACT INFORMATION

Send Payments To:

(REQUIRED ONLY if different from above)

Name and Title _____

Address _____

Phone No _____

Fax No _____

Email Address _____

This document must be completed and returned with your Submittal



FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

CERTIFICATE OF INSURANCE

ISSUED TO:

Sumter County Board of
County Commissions
7375 Powell Road, Ste 206
Wildwood, FL 34785

Attention: Financial Services Department

COPY PROVIDED TO:

Marion Service Roofing & Sheet Metal Co.
P.O. Box 1628
Ocala, FL 34478

Marion Service Roofing & Sheet Metal Co.

This is to Certify that: P.O. Box 1628
Ocala, FL 34478

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

COVERAGE NUMBER:	<u>870-001223</u>	<u>LIMITS</u>	
EFFECTIVE DATE:	<u>1/1/2011</u>	Workers' Compensation:	Statutory - State of Florida
EXPIRATION DATE:	<u>1/1/2012</u>	Employers' Liability:	\$1,000,000.00 Each Accident \$1,000,000.00 Disease, Each Employee \$1,000,000.00 Disease, Policy Limit

REMARKS: Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

LIC # CCC054796, Timothy Shanahan Lic # CCC1328582 Jonathan Belcher

This certificate is issued as a matter of information only, is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be constructed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above. This provides coverage for Florida policyholders and Florida domiciled employees only.

By:

Brett Stiegel, Administrator
FRSA-SIF

By:

Debra Guidry, CPCU, Underwriting Manager
FRSA-SIF

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/12/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER J Smith Lanier & Co-Lexington Powell-Walton-Milward P O Box 2030 Lexington, KY 40588	CONTACT NAME: Roxanne Cameron PHONE (A/C, No, Ext): 800-796-3567 FAX (A/C, No): 859-254-8020 E-MAIL ADDRESS: rcameron@pwm-jsl.com PRODUCER CUSTOMER ID #:
INSURED Marion Service Roofing & Sheet Metal Company P.O. Box 1628 Ocala, FL 34478	INSURER(S) AFFORDING COVERAGE INSURER A: Westfield Insurance Company NAIC # 24112 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		CMM5942244	04/30/2011	04/30/2012	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CMM5942244	04/30/2011	04/30/2012	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0		CMM5942244	04/30/2011	04/30/2012	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Certificate Holder is named as Additional Insured as per written contract with respect to the General Liability policy described above and subject to provisions and limitations of the policy. Umbrella follows form of the Underlying Scheduled policy.

CERTIFICATE HOLDER

CANCELLATION

Sumter County Board of County Commissioners Financial Services Dept. 7375 Powell Rd, Suite 206 Wildwood, FL 34785	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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AC# 5074801

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L10080501719

DATE	BATCH NUMBER	LICENSE NBR
08/05/2010	100042099	CCC054796

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2012

SHANAHAN, TIMOTHY STEWARD
MARION/SERVICE ROOFING & SHEET METAL COMPANY
1011 SW 33 AVE STE 200
PO BOX 1628
OCALA FL 34478

CHARLIE CRIST
GOVERNOR

CHARLIE LIEM
SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 5050111

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L10072300689

DATE	BATCH NUMBER	LICENSE NBR
07/23/2010	100042099	CCC1328582

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2012

BELCHER, JONATHAN OLIVER
MARION/SERVICE ROOFING & SHEET METAL COMPANY
1011 SW 33RD AVE
BLDG. 200
OCALA FL 34474

CHARLIE CRIST
GOVERNOR

CHARLIE LIEM
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW



CITY OF OCALA OCCUPATIONAL LICENSE TAX CERTIFICATE

P.O. BOX 1270
OCALA, FLORIDA 34478-1270
(352) 629-8421
2011-2012

LICENSE

ACCOUNT NO. A27444
Bus. License No. 32920
Type of Business: CONTRACTORS

PAID DATE

8/3/2011

B
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S
MARION SERVICE ROOFING & SHEET METAL CO
SHANAHAN, TIMOTHY S
3526227256

IS HEREBY LICENSED TO ENGAGE IN BUSINESS LOCATION

1011 SW 33 AV #200

MARION SERVICE ROOFING & SHEET METAL CO
PO BOX 1628
OCALA, FL 34478-1628

LICENSE FEE DESCRIPTION	AMOUNT
State Certified Contractors	\$20.00
All Professionals	\$75.00

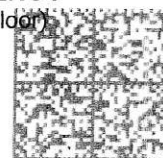
TOTAL FEES: \$95.00

CITY OF OCALA
CERTIFICATE OF COMPETENCY

210 SE 3rd STREET (Second Floor)
OCALA, FLORIDA 34471
(352) 629-8421

QUALIFIER FOR BUSINESS
BELCHER, JONATHAN O

EXPIRES
9-30-2012



U.S. POSTAGE >> PITNEY BOWES
ZIP 34471 \$ 000.44⁰
02 1W
0001369242 AUG 25 2011

CATEGORY	REGISTRATION#
ROOFING	CCC1328582

CERTIFICATION FEE
20.00

Paid Da 08/23/2011

MARION SERVICE ROOFING & SHEET METAL
P O BOX 1628

OCALA, FL 34478

34478-1628



Marion County Building Services
Contractor Licensing

CERTIFIED ROOFING CONTRACTOR

Cert Nbr:676 Exp:09/30/2011 Status: ACTIVE

State Nbr:CCC054796 Exp:08/31/2010

MARION/SERVICE ROOFING & SHEET METAL CO
TIMOTHY STEWARD SHANAHAN
PO BOX 1628

Ocala

FL 34478-1628

Signed: 